## HIGH SCHOOL INTERNSHIP APPLICATION TRANSMITTAL FORM

Student Name (Please Print)  High School Name (Please Print)	
Internship Coordinator/Guidance Counselor Name (Please Print)	
Coordi	nator's Phone Numbere-mail
Best tir	me of day for contact
Period	for Which Application is Submitted (please circle) Summer Fall Spring Year
Please (	Check Category for Which Application is Submitted:
0	Category A: Scientific/Technical Intern – for students intending to pursue undergraduate studies in science, math, or engineering-related majors. A minimum cumulative GPA 3.0 is required, and the student must have completed and be taking science and math-related courses.  Category B: Technical/Trade Intern – for students with vocational/technical/mechanical skills. A minimum cumulative GPA 2.3 is required.  Category C: Office/Administrative Intern – for students without specific technical skills, but who may provide administrative support in an office environment. A minimum cumulative GPA 2.3 is required.  tegories A and C above, students must have computer skills. Computer skills are encouraged for by B.
	above named student, successful fulfillment of this internship will (please check all that apply): Provide academic credit Provide work/study credit Fulfill a community service requirement Fulfill a graduation requirement N/A Other (please explain)
I have	Transmittal form (completed by internship or guidance counselor) NIST High School Internship application (completed by student) Resume that includes a listing of courses that are applicable to the internship (prepared by student) Letter of recommendation (secured by student) Unofficial transcript (secured by student) 750-1000 word essay (prepared by student) Five sets (one original and four copies) of all of the above documents in one envelope with the student's name, internship coordinator or guidance counselor's name, and the high school name one the outside of the envelope (transmitted by internship coordinator or guidance counselor) reviewed this student's application materials and the above checklist and approve the sion of this application.
 Internsl	nip Coordinator/Guidance Counselor Signature  Date